PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CO/21-22286/PI/CGC 207/DIVIDA

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			17					RATE	FEE	7	RATE	FEE.
FC	OR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
тc	TAL CHARGE	ABLE - CLAIMS	/) minus-20= -		*	. W		X\$ 9=		OR	X\$18=	. 0
INI	DEPENDENT C	LAIMS	2 m	nus 3 =	*	0		X43=		OR	X86=	.: _, 0.*
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT	•			·	+.145=		OR.	+290=	
* 41	the difference	in column 1 is	less than ze	ero, enter	"0" in c	"0" in column 2.		TOTAL		OR		7:2-(-)
CLAIMS AS AMENDED - PART II								TOTAL	L	JON	OTHER	THAN
		(Column 1)		(Colun	nn 2)	(Column 3)	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY ···	PRESENT EXTRA-		RATE.	ADDI- TIONAL FEE	: .	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
WE.	Independent	*	Minus	***		=		X43=		OR-	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL ADDIT, FEE			TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)									,	ADDII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=	•	OR	X\$18=	
AME	Independent	*	Minus	this Children	CLA!3A	=		_X43=_		OR	_X86=_	
	PINST PRESE	NTATION OF ME	LIPLE DEF	EINDEIN	CEANVE	ž.		+145=		OR	+290=	and and the same of the same o
				: •				TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colum			i -	· ·		•		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER . USLY	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		e .		X\$ 9=	- 10	OR-	X\$18=	
	Independent	•	Minus	***		=		X43=	`.	o'R	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	·
***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box										TOTAL ADDIT. FEE umn 1.	